| ~ | 1 | Effective October 1, 2003 | | | | | | | | | | | | | 10-006856 | | | | | | | |
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| | | | _ | | - PART | (Column 2) | | | • | SMA TYP | | ENTITY | | | OTH | THER THAN | | | | | | |
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| | | FOR | | | | NUMBER FILED . | | | NU | NUMBER EXTRA | | | BASI | | | | OR | BASIC F | | 770. | | |
| | TOTAL CHARGEABLE CLAIMS | | | | | minus 20= | | | • | | | X\$ 9 | | 9= | · | | OR | 1 | | | | |
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| | Ľ | | PEN | DENT CLA | IM P | RESENT | | | | | | | +145= | | | | | R +290= | | | | |
| | • | If the differe | ince i | in column | 1 is | less tha | ess than zero, enter " | | | 0° in column 2 | | TOTAL | | | | | OR TOTAL | | | | \dashv | |
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| ı | | 121 | | CLAIMS REMAININ | | | | (Columi HIGHE: | ST | (Column | 3) | Г | SMA | | | | OR T | SMALI | — | | ∤ | |
| | NDMENT | 121/ | 24 | AFTER AMENDME | | · | | NUMBE PREVIOU PAID FO | SLY | PRESEN EXTRA | Ţ | L | RATE | | ADDI- TIONAL FEE | | | RATE | T | ADDI: IONA FEE | AL | |
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| FNT | | | 1 | REMAINING AFTER MENDMENT | | | | NUMBER PREVIOUS PAID FOR | LY | PRESENT EXTRA | | A | ATE | TIC | DDI- DNAL | | | RATE | TIO | DDI- NAL | | |
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| If the entry in column 1 is less than the entry in column 2 write to in column 2 | | | | | | | | | | | | +145 | | | | P | | 0= | _ | | <u>-</u> | |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | FEE | | 4 | • | | | | | | | |
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| un F | | -875. (Rev. 10/0 | 3} | • | | | | | | . 8 | etent | and T | adema | k Office | e, Ų.S. | DEPA | RTME | NT OF CO | MMER | CE | | |
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